



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Domestic Limited Liability Company
Annual Report - Amended**

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2016

1. ID No. 000770368

2. Exact Name of the Limited Liability Company DAVID PARRILLO PLUMBING/HEATING & SON LLC

3. State of Formation

State: RI

ARTICLE III

Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of business in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification [click here](#).

NAICS Code

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

PLUMBING AND HEATING

5. Principal Office Address

No. and Street: 26 COLVIN STREET
City or Town: HOPE State: RI Zip: 02831 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:
No. and Street: PO BOX 396
City or Town: HOPE State: RI Zip: 02831 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	DAVID C PARRILLO	26 COLVIN STREET, P.O. BOX 396 HOPE, RI 02831 USA

MANAGER

NATALIE ANN PARRILLO

26 COLVIN STREET, P.O. BOX 396
HOPE, RI 02831 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

DAVID C. PARRILLO 26 COLVIN STREET PO BOX 396 HOPE , RI 02831

Signed this 10 Day of August, 2017 at 3:54:39 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By DAVID C. PARRILLO
Signature of Authorized Person

Form No. 632
Revised 09/07

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State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

August 10, 2017 03:53 PM

A handwritten signature in blue ink, appearing to read "Nellie M. Gorbea". The signature is fluid and cursive, written in a professional style.

Nellie M. Gorbea
Secretary of State

